

Application Data Sheet

Application Information

Application number:: Applied for
Filing Date:: 10/15/01
Application Type:: Divisional
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??::
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: DELIVERY SYSTEM TO MODULATE IMMUNE
RESPONSE
Attorney Docket Number:: 019664-000410US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 3
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Roberto
Middle Name::	L.
Family Name::	Rivera
Name Suffix::	
City of Residence::	Cincinnati
State or Province of Residence::	OH
Country of Residence::	US
Street of Mailing Address::	130 Ritchie Avenue
City of Mailing Address::	Cincinnati
State or Province of mailing address::	OH
Country of mailing address::	
Postal or Zip Code of mailing address::	45215

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation::	Representative Number::	Representative Name::
Primary	31,677	Kenneth A. Weber
Associate	47,163	Hugh Wang

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::
Divisional 09/041,514 03/12/98

Foreign Priority Information

Country::

Application number::

Filing Date::

Assignee Information

Assignee Name:: ALLERGENICS, INC. (current address)

Street of mailing address:: 395 OYSTER POINT BOULDEVARD, SUITE 113

City of mailing address:: **SOUTH SAN FRANCISCO**

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94080

□□□□□□□□□□□□□□□